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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/659,874	09/09/2003	Bill Shapiro	07844-609001	5247
21876 7590 08/21/2007 FISH & RICHARDSON P.C.			EXAMINER	
P.O. Box 1022			PAN, JOSEPH T	
MINNEAPOLIS, MN 55440-1022			ART UNIT	PAPER NUMBER
		2135	2135	
			MAIL DATE	DELIVERY MODE
			08/21/2007	. PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Application No. Applicant(s) 10/659.874 SHAPIRO ET AL. Interview Summary Examiner Art Unit 2135 Joseph Pan All participants (applicant, applicant's representative, PTO personnel): (1) Joseph Pan. (3)Mr. Scott Helleson. (2) Ms. Arrienne M. Lezak. Date of Interview: 15 August 2007. Type: a) ☐ Telephonic b) ☐ Video Conference c) Personal [copy given to: 1) □ applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: . Claim(s) discussed: _____ Identification of prior art discussed: _____. Agreement with respect to the claims f was reached. g was not reached. f N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant and Applicant's representative discussed the amentment with Examiner. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Ekarniner's signature, if required